

INSTRUCTIONS FOR USE EVALUATION:

MOST APPLICANTS WILL BE REQUIRED TO SUBMIT AN APPLICATION FOR USE EVALUATION PRIOR TO A FORMAL SITE PLAN REVIEW APPLICATION. USE EVALUATION ALLOWS AN APPLICANT TO PRESENT A CONCEPT TO THE PLANNING BOARD FOR DISCUSSION AND FEEDBACK AND TO POSE QUESTIONS AND REQUEST GUIDANCE FROM THE PLANNING BOARD PRIOR TO SUBMITTING A FORMAL APPLICATION. IT ALSO ALLOWS THE PLANNING BOARD TO IDENTIFY CONCERNS, REQUIREMENTS AND DISCUSS FEASIBILITY OF THE APPLICATION. APPLICANTS AND /OR REPRESENTATIVE MUST BE PRESENT AT THE MEETING AND HAVE FORMALIZED LEGAL STANDING WITH RESPECT TO THE SUBJECT PROPERTY (I.E., OWNER, TENANT, CONTRACTOR, ETC.).

THE COMPLETED APPLICATION MUST BE DELIVERED TO THE BUILDING DEPARTMENT AT LEAST (10) BUSINESS DAYS PRIOR TO THE WORK SESSION MEETING. AN INCOMPLETE APPLICATION WILL RESULT IN DELAYS, AND WILL NOT BE PLACED ON THE AGENDA.

CHECKLIST OF ITEMS PREPARED FOR PLACEMENT ON THE AGENDA OF THE PLANNING BOARD

- 1. SEVEN (7) COMPLETED AND SIGNED APPLICATIONS TO INCLUDE THE FOLLOWING:
- 2. SEVEN (7) SETS OF DRAWINGS AND A SITE PLAN AND/OR SURVEY. ANY VISUAL MATERIAL THAT MAY BE HELPFUL OR ILLUSTRATIVE.
- 3. BRIEF COVER LETTER TO PLANNING BOARD EXPLAINING THE PROPOSED ACTION.
- 4. IF OTHER THAN OWNER MAKES APPLICATION, SUBMIT OWNER'S NAME AND ADDRESS WITH OWNER'S ENDORSEMENT.
- 5. PRIOR EXISTING RESTRICTIVE COVENANTS WHICH REGULATE USE OF THE SUBJECT LANDS.
- 6. ENVIRONMENTAL ASSESSMENT FORM, IF APPLICABLE.
- 7. USE EVALUATION FEE: \$150.00
- 8. COMPLETE HISTORIC PRESERVATION APPLICATION (FORM HPC-1) IF A BUILDING PERMIT OR SAIGN PERMIT IS REQUIRED.

APPLICANT SHALL BE RESPONSIBLE FOR ALL CONSULTING FEES. VILLAGE CODE SECTION 150-40



BUILDING DEPARTMENT
VILLAGE OF GREENPORT
 236 Third Street, Greenport, NY 11944

IS PROPERTY IN THE HISTORIC DISTRICT?
 IF YES, PLEASE SEE CHECKLIST ITEM 8
 ON PAGE 4.

USE EVALUATION APPLICATION

Applicant

NAME: _____

IF A CORPORATION,
 NAME AND ADDRESS OF AUTHORIZED OFFICER: _____

ADDRESS: _____

PHONE: _____

SIGNATURE: _____ DATE: _____

STATE IF APPLICANT IS OWNER, LESSEE, AGENT, ARCHITECT, ENGINEER, BUILDER, GENERAL CONTRACTOR, ELECTRICIAN, and PLUMBER, OR OTHER:

Owner

NAME: _____

ADDRESS: _____

PHONE: _____

Location Of Site

TAX MAP DISTRICT:	SECTION:	BLOCK:	LOT:
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STREET ADDRESS: _____

CURRENT USE: _____

PRIOR USE (IF ANY) _____

Project Description

RESIDENTIAL _____ COMMERCIAL _____

PROPOSED STARTING DATE: _____ PROPOSED COMMERCIAL DATE: _____

PROJECT DESCRIPTION (UTILITY HOOK UP, STRUCTURES, USES) _____

PROPERTY IS ZONED _____ R-1 _____ R-2 _____ CR _____ WC _____ CG

PROJECT WILL REQUIRE THE FOLLOWING PERMITS:
VILLAGE OF GREENPORT:

_____ BUILDING PERMIT _____ WETLANDS PERMIT _____ ZBA VARIANCE

OTHER AGENCIES: _____ SUFFOLK COUNTY PLANNING BOARD

_____ SUFFOLK COUNTY HEALTH DEPARTMENT

PLANNING BOARD APPLICATION AUTHORIZATION

(WHERE APPLICANT IS NOT THE OWNER)

I, _____ RESIDING AT _____
(PRINT PROPERTY OWNER'S NAME) (MAILING ADDRESS)

DO HEREBY AUTHORIZE _____
(AGENT)

TO APPLY FOR VARIANCE(S) ON MY BEHALF FROM THE GREENPORT VILLAGE PLANNING BOARD. THE
PROPERTY

IS LOCATED AT _____, GREENPORT,
NY.

SCTM # 1001- _____.

SIGNATURE:

PRINTED:

DATE: